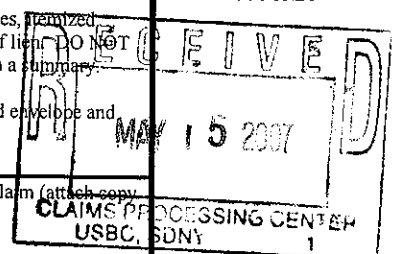
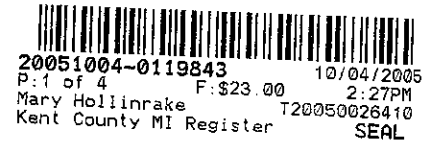


B 10 (Official Form 10) (04/07)

UNITED STATES BANKRUPTCY COURT <b>SOUTHERN</b> DISTRICT OF <b>NEW YORK</b>		<b>PROOF OF CLAIM</b>												
Name of Debtor <b>DELPHI CORPORATION, et al.</b>		Case Number <b>05-44481</b>												
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		<b>AMENDED</b>												
Name of Creditor (The person or other entity to whom the debtor owes money or property): <b>1st Choice Heating &amp; Cooling, Inc.</b>	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.  <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case.  <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.													
Name and address where notices should be sent: <b>Joel D. Applebaum (P36774) - Clark Hill PLC 500 Woodward Ave., Ste 3500 Detroit, MI 48226 Telephone number: (313) 965-8300</b>	<b>THIS SPACE IS FOR COURT USE ONLY</b>													
Last four digits of account or other number by which creditor identifies debtor:	Check here <input type="checkbox"/> replaces if this claim <input checked="" type="checkbox"/> amends a previously filed claim, dated: <b>07/31/2006</b>													
<b>1. Basis for Claim</b> <input checked="" type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input checked="" type="checkbox"/> Other <b>Construction Lien Claimant and HVAC Contractor</b>														
From _____ to _____ (date) (date)														
<b>2. Date debt was incurred:</b> <b>08/27/2005 - 09/26/2005</b>		<b>3. If court judgment, date obtained:</b>												
<b>4. Classification of Claim.</b> Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time the case was filed. See reverse side for important explanations.														
<b>Unsecured Nonpriority Claim \$</b> _____  <input type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or c) none or only part of your claim is entitled to priority.		<b>Secured Claim</b> <input checked="" type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff).  Brief Description of Collateral: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Other _____ <input type="checkbox"/> Motor Vehicle  Value of Collateral: <b>exceeds value of claim</b>  Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ <b>22,046.54</b>												
<b>Unsecured Priority Claim</b>  <input type="checkbox"/> Check this box if you have an unsecured claim, all or part of which is entitled to priority.  Amount entitled to priority \$ _____  Specify the priority of the claim: <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950),* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).		<input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____).  *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.												
<b>5. Total Amount of Claim at Time Case Filed:</b> <table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">\$</td> <td style="text-align: right;"><b>22,046.54</b></td> <td style="text-align: right;"><b>22,046.54</b></td> </tr> <tr> <td></td> <td style="text-align: center;">(unsecured)</td> <td style="text-align: center;">(secured)</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">(priority)</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">(total)</td> </tr> </table>			\$	<b>22,046.54</b>	<b>22,046.54</b>		(unsecured)	(secured)			(priority)			(total)
\$	<b>22,046.54</b>	<b>22,046.54</b>												
	(unsecured)	(secured)												
		(priority)												
		(total)												
<input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges. <b>See attached.</b>														
<b>6. Credits:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		<b>THIS SPACE IS FOR COURT USE ONLY</b>												
<b>7. Supporting Documents:</b> Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. <b>DO NOT SEND ORIGINAL DOCUMENTS.</b> If the documents are not available, explain. If the documents are voluminous, attach a summary.														
<b>8. Date-Stamped Copy:</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.														
Date <b>05/04/2007</b>	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): <b>/s/ Joel D. Applebaum (P36774) - Clark Hill PLC</b>													

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.



**CLAIM OF LIEN**

Notice is hereby given that on July 11, 2005, 1<sup>st</sup> Choice Heating and Cooling, Inc. of 8147 Island View Drive, Newaygo, Michigan 54337, first provided labor or material for an improvement to the property described in the attached EXHIBIT 1, the owner of which property is Delphi Automotive Systems, LLC. The last day of providing the labor or material was September 12, 2005.

**TO BE COMPLETED BY A LIEN CLAIMANT WHO IS A  
CONTRACTOR, SUBCONTRACTOR, OR SUPPLIER:**

The lien claimant's contract amount, including extras, is \$15,990.86. The lien claimant has received payment thereon in the total amount of \$0, and therefore claims a construction lien upon the above-described real property in the amount of \$15,990.86.

Dated: Oct. 3, 2005

1<sup>st</sup> CHOICE HEATING & COOLING, INC.

/s/ Brian Plaggemars  
BRIAN PLAGGEMARS, President

STATE OF MICHIGAN )  
KENT COUNTY )

The foregoing instrument was acknowledged before me this October 3, 2005 by Brian Plaggemars, President of 1<sup>st</sup> Choice Heating & Cooling, Inc.

Subscribed and sworn to before me on October 3, 2005.

/s/ Gwendolyn G. Hancock

Notary public, State of Michigan, County of Kent.


Acting in Kent County, Michigan

My commission expires 7/21/2007.

Gwendolyn G. Hancock, Notary Public  
State of Michigan, County of Kent  
My Commission Expires 7/21/2007  
Acting in the County of Kent

REC'D OCT 04 2005

Drafted by and when recorded return to:  
Thomas M. Wardrop  
300 Ottawa Ave., N. W. - Suite 150  
Grand Rapids, MI 49503  
616.459.1225

  
20051004-0119843 10/04/2005  
P:2 of 4 F:\$23.00 2:27PM  
Mary Hollinrake T20050026410  
Kent County MI Register SEAL

20051004-0119843 10/04/2005  
P:3 of 4 F:\$23.00 2:27PM  
Mary Hollinrake T20050026410  
Kent County MI Register SEAL

The Northwest  $\frac{1}{4}$  of the Northwest  $\frac{1}{4}$  and the Southwest  $\frac{1}{4}$  of the Northwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West, City of Wyoming, Kent County, Michigan, except the North 206.25 feet of the East 528 feet thereof. Also except therefrom, commencing on the South line of Burton Street 528 feet West and 53.25 feet South of the Northeast corner of the Northwest  $\frac{1}{4}$  of the Northwest  $\frac{1}{4}$  of Section 11; thence South parallel with the East line thereof 153 feet; thence West parallel with the North line of said Section 9.0 feet; thence Northerly 152.9 feet to a point on the said South line of Burton Street 7.5 feet West of the place of beginning; thence East 7.5 feet to the place of beginning. Also excepting, part of the Northwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West, City of Wyoming, Kent County Michigan described as: Commencing at the Northwest corner of said section; thence North 90 degrees 00 minutes 00 seconds East along the North line of said Section 431.98 feet to the place of beginning of this description; thence North 90 degrees 00 minutes 00 seconds East along the North line of said section 291.62 feet; thence South 01 degrees 40 minutes 00 seconds East 333.46 feet; thence South 90 degrees 00 minutes 00 seconds West parallel with the North line of said section 291.62 feet; thence North 01 degrees 40 minutes 00 seconds West 333.46 feet to the place of beginning. Also excepting,

Part of the West  $\frac{1}{2}$  of the Northwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West, Wyoming Township, Kent County, Michigan, described as follows: Commencing on the North line of said section at a point 139.5' East of the Northwest corner thereof; thence South 57.32' to a point 50' South of the centerline of Burton Street Widening as now surveyed; thence Easterly 635', more or less, parallel to and 50' distant from said center line; thence North 52.56' to North line of said section; thence West 635' along said section line to beginning.

Also excepting,

A parcel of land situated in the Northwest corner of the Northwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West (Wyoming Township) Kent County, Michigan, described as follows: Beginning at a point South 46°02' East 47.58' from the Northwest corner of said Section 11, thence South 89°57' East 106.51'; thence South 0°22' East 24.32' to a point; thence Southwesterly 137.50' along a curve to the left whose radius is 86.00' to a point which is South 43°41' West, 123.62' from the last mentioned point; thence South 87°53' West 17.00'; thence North 2°07' West 114.40' to the point of beginning, being in all 0.134 acres more or less.

Also,

The North  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the Northwest  $\frac{1}{4}$  of the Southwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West, City of Wyoming, Kent County, Michigan.

Also,

The South  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the Northwest  $\frac{1}{4}$  of the Southwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West, City of Wyoming, Kent County, Michigan.

continued

EXHIBIT 1

20051004-0119843 10/04/2005  
P.4 of 4 F:\$23.00 2:27PM  
Mary Hollinrake T20050026410  
Kent County MI Register SEAL

The North  $\frac{1}{2}$  of the South  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the Northwest  $\frac{1}{4}$  of the Southwest  $\frac{1}{4}$  of Section 11. Town 6 North, Range 12 West, City of Wyoming, Kent County, Michigan.

Excepting therefrom,

That part of the Northwest  $\frac{1}{4}$  and of the Southwest  $\frac{1}{4}$  of Section 11, Town 6 North, Range 12 West, City of Wyoming, Kent County, Michigan described as: Commencing at the Northwest corner of said Section, thence South 3 degrees 20 minutes 11 seconds East 148.65 feet along the West line of said Section; thence North 86 degrees 39 minutes 49 seconds East 33.0 feet to the place of beginning of this exception; thence North 86 degrees 39 minutes 49 seconds East 17.0 feet; thence South 3 degrees 20 minutes 11 seconds East 420.0 feet; thence South 86 degrees 39 minutes 49 seconds West 10.0 feet; thence South 3 degrees 20 minutes 11 seconds East 2096.74 feet to the East and West  $\frac{1}{4}$  line, thence South 4 degrees 00 minutes 38 seconds East 166.52 feet parallel with the West line of said Section to the South line of the North  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the North  $\frac{1}{2}$  of the Northwest  $\frac{1}{4}$  of the Southwest  $\frac{1}{4}$ , thence South 88 degrees 37 minutes 49 seconds West 7.01 feet along said South line, thence North 4 degrees 00 minutes 38 seconds West 166.51 feet to the East and West  $\frac{1}{4}$  line, thence North 3 degrees 20 minutes 11 seconds West 2516.48 feet to the place of beginning.

0050561  
Filed/ Sealed For Record In  
Ottawa County, MI  
Gary Scholten R.O.D.  
10/04/2005 At 2:26:47 P.M.  
CLAIM OF LIEN \$20.00  
Liber 004995 Page 00959



\*0050561\*

**CLAIM OF LIEN**

Notice is hereby given that on July 5, 2005, 1<sup>st</sup> Choice Heating and Cooling, Inc. of 8147 Island View Drive, Newaygo, Michigan 49337, first provided labor or material for an improvement to the property described in the attached EXHIBIT 1, the owner of which property is Delphi Automotive Systems, LLC. The last day of providing the labor or material was September 23, 2005.

**TO BE COMPLETED BY A LIEN CLAIMANT WHO IS A  
CONTRACTOR, SUBCONTRACTOR, OR SUPPLIER:**

The lien claimant's contract amount, including extras, is \$16,418.19. The lien claimant has received payment thereon in the total amount of \$0, and therefore claims a construction lien upon the above-described real property in the amount of \$16,418.19.

Dated: 10/3/05

1<sup>st</sup> CHOICE HEATING & COOLING, INC.

/s/ Brian Plaggemars  
BRIAN PLAGGEMARS, President

STATE OF MICHIGAN )  
KENT COUNTY )

The foregoing instrument was acknowledged before me this October 3, 2005 by  
Brian Plaggemars.

Subscribed and sworn to before me on October 3, 2005.

/s/ Gwendolyn G. Hancock

Notary public, State of Michigan, County of Kent.  
Acting in Kent County, Michigan  
My commission expires 07/21/07.

Gwendolyn G. Hancock, Notary Public  
State of Michigan, County of Kent  
My Commission Expires 7/21/2007  
Acting in the County of Kent

LIBRARY 995 PG 960

Drafted by and when recorded return to:

✓ Thomas M. Wardrop  
300 Ottawa Ave., N. W. - Suite 150  
Grand Rapids, MI 49503  
616.459.1225

2 Pg 8 of 25  
 LIBER 4995 PG 961

Part of the East 1/2 of Section 22, Town 8 North, Range 14 West, City of Coopersville, Ottawa County, Michigan, described as: Beginning on the South Section line a distance of South 89 degrees 07 minutes 30 seconds East 603.05 feet from the South 1/4 corner of said Section; thence North 0 degrees 00 minutes a distance of 1332.09 feet parallel with the North-South 1/4 line; thence North 89 degrees 33 minutes 33 seconds West 255.50 feet along the South line of the North 1/2 of the Southeast 1/4 of said Section; thence North 0 degrees 00 minutes a distance of 627.00 feet; thence North 89 degrees 33 minutes 33 seconds West 347.50 feet; thence North 0 degrees 00 minutes a distance of 959.01 feet along the North-South 1/4 line to a point on the Southerly line of the Grand Trunk Railroad property (being 100.00 feet wide); thence South 73 degrees 40 minutes 22 seconds East 2747.12 feet along said railroad property line to a point on the East line of said Section 22; thence South 0 degrees 43 minutes 21 seconds West 1967.57 feet along the East Section line to a point located 213.70 feet North of the Southeast Section corner; thence North 89 degrees 48 minutes 21 seconds West 580.60 feet parallel with the North line of Randall Street; thence South 0 degrees 43 minutes 21 seconds West 150.00 feet; thence South 89 degrees 48 minutes 21 seconds East 580.60 feet along the Northerly right of way line of Randall Street (formerly Highway US-16); thence South 0 degrees 43 minutes 21 seconds West 63.70 feet to the Southeast Section corner; thence North 89 degrees 07 minutes 30 seconds West 2006.08 feet along the South Section line to the place of beginning. Subject to a right of way for highway purposes over the Southerly part thereof (Randall Street, formerly Highway US-16) recorded in Liber 298, Page 581, and also subject to a right of way for highway purposes 33.00 feet in width lying contiguous to and East of the North-South 1/4 line of said Section.

Also, Commencing at the Southwest corner of the North 1/2 of the Southeast 1/4 of Section 22, Township 8 North, Range 14 West, thence East 21 rods and 1 foot; thence North 38 rods; thence West 21 rods and 1 foot to the road, thence South to the beginning.

Also, All that part of Section 22, Town 8 North, Range 14 West described as: Commencing at a point 64.15 feet North of the Southeast corner of Section, thence Northerly on the East line of said Section 150 feet, thence North 87 degrees 15 minutes West 480.6 feet, thence Southerly parallel to the East line of said Section 150 feet; thence South 87 degrees 15 minutes East 480.6 feet to place of beginning, City of Coopersville, Polkton Township, Ottawa County, Michigan.

Also, The West 100 feet of that part of Section 22, Town 8 North, Range 14 West, described as commencing at a point 64.15 feet North of the Southeast corner of said Section, thence Northerly on the East line of said Section 150 feet, thence North 87 degrees 15 minutes West 580.6 feet, thence Southerly parallel to the East line of said Section 150 feet, thence South 87 degrees 15 minutes East 580.6 feet to place of beginning, City of Coopersville, Polkton Township, Ottawa County, Michigan.

Except a parcel of land described as: Commencing at the Southeast corner of said Section for the place of beginning of this description; thence North 89 degrees 07 minutes 30 seconds West 40.00 feet along the South line of said

Section, thence North 0 degrees 43 minutes 21 seconds East 2192.33 feet parallel with the East line of said Section to the Southerly right-of-way line of the Grand Trunk Western Railroad (100.00 feet wide), thence South 73 degrees 40 minutes 22 seconds East 41.53 feet along said right-of-way line to the East line of said Section, thence South 0 degrees 43 minutes 21 seconds West 2181.27 feet along said Section line to the place of beginning.

EXHIBIT 1



dependent Bank 0724-1297-2

NEWAYGO BRANCH  
40 NORTH STATE STREET  
NEWAYGO, MI 49337  
(231) 652-1665

## CHARGE BACK NOTICE

Checking Account

5716807

1ST CHOICE HEATING & COOLING INC  
8147 ISLAND VIEW DR  
NEWAYGO MI 49337-9215

The following item(s) endorsed by you were returned on 10/17/2005

Amount	Description	Return Reason	Maker
9,646.46	Chargeback	REFER TO MAKER	DELPHI
	Check # / Message	900521840	
5.00	Service charge		
	Tracer #	11075641	

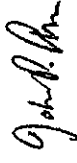
Return Item Total	Number	Amount
Service Charge Total	1	9,646.46
Account Debit Total	1	5.00
	2	9,651.46

### Check 21 Act Consumer Awareness Disclosure:

Substitute Checks and Your Rights-To make check processing faster, federal law permits banks to replace original checks with "substitute checks." These checks are similar in size to original checks with a slightly reduced image of the front and back of the original check. You may use a substitute check as proof of payment just like the original check. Some or all of the checks that you receive back from us may be substitute checks. This notice describes rights you have when you receive substitute checks from us. In certain cases, federal law provides a special procedure that allows you to request a refund for losses you suffer if a substitute check is posted to your account. The losses you may attempt to recover under this procedure may include the amount that was withdrawn from your account and fees that were charged as a result of the withdrawal. The amount of your refund under this procedure is limited to the amount of your loss or the amount of the substitute check, whichever is less. You also are entitled to interest on the amount of your refund if your account is an interest-bearing account. If your loss exceeds the amount of the substitute check, you may be able to recover additional amounts under other law. If you use this procedure, you may receive up to (\$2,500.00) of your refund (plus interest if your account earns interest) within (10) business days after we received your claim and the remainder of your refund (plus interest if your account earns interest) not later than (45) calendar days after we received your claim. We may reverse the refund (including any interest on the refund) if we later are able to demonstrate that the substitute check was correctly posted to your account. If you believe that you have suffered a loss relating to a substitute check that you received and that was posted to your account, please contact us. You must contact us within (40) calendar days of the date that we notified you of the substitute check in question or the account statement showing that the substitute check was posted to your account, whichever is later. We will extend this time period if you were not able to make a timely claim because of extraordinary circumstances. Your claim must include- A description of why you have suffered a loss; An estimate of the amount of your loss; An explanation of why the substitute check you received is insufficient to confirm that you suffered a loss; and A copy of the substitute check [and/or] descriptive information to help us identify the substitute check.

\*072402652\*  
 10/17/2005  
 18000109  
 This is a LEGAL COPY of your  
 check. You can use it the  
 same way you would use the  
 original check.

0072402652 10/17/2005  
 18000109

<b>Delphi</b> Disbursement Serv/coos (NB) PO Box 62530 Phoenix, AZ 85062-2530		<b>DELPHI</b> RETURN TO: FED UTICA FOR DISBURSEMENT BELOW		CHECK No. 900521840	AMOUNT *****9,666.46
DATE 10/07/05	OCT 18 2005	**JPMORGAN CHASE BANK, N.A. 50307	*****46 CENTS	Delphi Disbursement Account	SIGNATURE 
PAY TO THE ORDER OF *FIRST CHOICE HEATING & COOLING* *INC* 8147 ISLANDVIEW DR NEWAYGO MI 49537		072402652		AUDIT	
The Chase Manhattan Bank, N.A. Syracuse, New York		900521840 4021309379 601 2 5044 21		9000964646	

900521840 4021309379 601 2 5044 21 9000964646

**1st Choice Heating & Cooling  
Customer Open Balance  
January 1 through October 7, 2005**

Type	Date	Num	Memo	Due Date	Open Balance	Amount
<b>Delphi-Coopersville</b>						
2044						
Invoice	8/27/2005	2346		10/11/2005	8,094.04	8,094.04
Total 2044					8,094.04	8,094.04
2049						
Invoice	8/27/2005	2345		10/11/2005	3,552.42	3,552.42
Total 2049					3,552.42	3,552.42
2088						
Invoice	9/6/2005	2357		10/21/2005	1,587.35	1,587.35
Total 2088					1,587.35	1,587.35
2166						
Invoice	9/6/2005	2358		10/21/2005	1,257.63	1,257.63
Total 2166					1,257.63	1,257.63
Total Delphi-Coopersville					12,491.44	12,491.44
<b>Delphi Energy &amp; Engine-Burlingame</b>						
2037						
Invoice	9/26/2005	2384		11/10/2005	150.75	150.75
Total 2037					150.75	150.75
2044						
Invoice	9/9/2005	2388		10/24/2005	416.00	416.00
Total 2044					416.00	416.00
2055						
Invoice	9/9/2005	2360		10/24/2005	342.75	342.75
Total 2055					342.75	342.75
2060						
Invoice	9/23/2005	2378		11/7/2005	214.75	214.75
Total 2060					214.75	214.75
2061						
Invoice	9/23/2005	2379		11/7/2005	378.00	378.00
Total 2061					378.00	378.00
2097						
Invoice	9/9/2005	2361		10/24/2005	4,802.85	4,802.85
Total 2097					4,802.85	4,802.85
Rental Chiller						
Invoice	9/9/2005	2359		9/19/2005	1,750.00	1,750.00
Invoice	9/9/2005	2367		9/19/2005	1,500.00	1,500.00
Total Rental Chiller					3,250.00	3,250.00
Total Delphi Energy & Engine-Burlingame					9,555.10	9,555.10
<b>TOTAL</b>					<b>22,046.54</b>	<b>22,046.54</b>

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
9/9/2005	2360

### **BILL TO**

Delphi Energy & Engine  
Attn: Bill Rogers  
2100 Burlingame, S.W.  
Grand Rapids, Mich. 49509

		P.O. NO.	TERMS	WORK ORDER #	
		AIB01551	Net 45	2055	
DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
WORK ORDER SIGNED BY GEORGE WIPPLE					
Labor to assist powerhouse operators in opening and cleaning motor cooling strainer on chiller #1. Found strainer screen coated with rust particles. Cleaned and reinstalled screen, ran and checked operation. Motor now running cool and unit operating satisfactorily. Checked steam valves in house #28 South, #30 East and #21 North and acquired numbers to order replacement parts. Tech. DWC	5	64.00	8/29/2005	Chiller 1, House 28-S, 30-E	320.00
Mileage	70	0.325	8/29/2005	Chiller 1, House 28-S, 30-E	22.75
Thank you for your business.			<b>Total</b>		<b>\$342.75</b>

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
9/9/2005	2361

### **BILL TO**

Delphi Energy & Engine  
Attn: Bill Rogers  
2100 Burlingame, S.W.  
Grand Rapids, Mich. 49509

		P.O. NO.	TERMS	WORK ORDER #	
		AIB01551	Net 45	2097	
DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
WORK ORDER SIGNED BY RAY FISHER Labor to respond to call to check House #21 for being warm in the space. Checked unit and found O/A actuator leaking and steam valve controller not controlling correctly. Repaired steam valve control temporarily and ordered new actuator. Checked Deack chiller for not cooling again, found unit low on refrigerant. Advise Todd H. and Dave will look at getting rental chiller and price for new Evap. Barrel. Dropped off cooling valve and power head for 31 house. Dropped off 90# of R-22 for DEACK stock at Delphi. Tech. BHP	6	64.00	8/17/2005	House #21, Deack	384.00
Labor to pick up parts for air houses and checked chiller#1 for high motor temp. will get parts to check motor cooling line. Left unit running. Will return to perform repairs on ASH houses. Tech. BHP	3	64.00	8/24/2005	Chiller #1, ASH Houses	192.00
Mileage for Aug. 17 and 24, 2005 and to pick up parts.	148	0.325		Chiller #1, ASH Houses	48.10
V5011A1882 5" Cooling Valve	1	2,993.20	8/17/2005	House #31	2,993.20
MP953E1418 Powerhead Large 13 Diaphragm	1	879.55	8/17/2005	House #31	879.55
1-1/2 Lift 10 PSI					
Refrigerant 22	90	3.40	8/17/2005	DEACK Stock	306.00
Thank you for your business.			<b>Total \$4,802.85</b>		

**1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

**Invoice**

DATE	INVOICE #
9/9/2005	2368

**BILL TO**

Delphi Energy & Engine  
Attn: David Draeger  
2100 Burlingame, S.W.  
Grand Rapids, Mich. 49509

		P.O. NO.	TERMS	WORK ORDER #	
		AIB01551	Net 45	2054	
DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
WORK ORDER SIGNED BY (SOMEONE ??) Labor to start up and check out rental chiller. Left unit operating satisfactorily. Tech. DWC	6.5	64.00	8/19/2005	Rental Chiller	416.00
Thank you for your business.			<b>Total</b>		<b>\$416.00</b>

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
9/23/2005	2378

### **BILL TO**

Delphi Energy & Engine  
Attn: Nadine  
2100 Burlingame, S.W.  
Grand Rapids, Mich. 49509

		P.O. NO.	TERMS	WORK ORDER #	
		450435650	Net 45	2060	
DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
WORK ORDER SIGNED BY Charlie 2nd shift powerhouse operator.					
Labor to respond to call to check air drier DC-2. Found unit running low oil pressure, adjusted expansion valve to bring less refrigerant back to compressor. Suspect evaporator barrel is dirty and not boiling off refrigerant. Adjusted hot gas by pass valves and checked operation at full load and at part load. Left unit operating. Tech. DWC	3	64.00	9/8/2005	DC-2	192.00
Mileage	70	0.325	9/8/2005	DC-2	22.75
Thank you for your business.			<b>Total</b>		<b>\$214.75</b>

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
9/23/2005	2379

### **BILL TO**

Delphi Energy & Engine  
Attn: Nadine  
2100 Burlingame, S.W.  
Grand Rapids, Mich. 49509

		P.O. NO.	TERMS	WORK ORDER #	
		450435650	Net 45	2061	
DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
WORK ORDER SIGNED BY Charlie 2nd shift powerhouse operator.					
Labor to check DC-2 air drier for running too cold with one air compressor running. Adjusted unloader control to run compressor unloaded with one compressor and loaded with both compressors running. Adjusted hot gas by pass to keep dewpoint not below 31 deg with one compressor unloaded and not above 42 deg with both compressors running loaded. Left unit operating. Tech. DWC	5.5	64.00	9/12/2005	DC-2	352.00
Mileage	80	0.325	9/12/2005	DC-2	26.00
Thank you for your business.			<b>Total</b>		<b>\$378.00</b>



# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
9/26/2005	2384

### **BILL TO**

Delphi Energy & Engine  
Attn: Nadine  
2100 Burlingame, S.W.  
Grand Rapids, Mich. 49509

P.O. NO.	TERMS	WORK ORDER #
450135650	Net 45	2037

DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
WORK ORDER SIGNED BY George Wipple					
Labor to respond to call of too warm in engineering offices, checked out offices with powerhouse operators. Found steam valve diaphragm leaking. Plugged air line which allowed cooling valve to open. Steam valve should be repaired. Tech. DWC	2	64.00	7/11/2005	Engineering Office	128.00
Mileage	70	0.325	7/11/2005	Engineering Office	22.75
Thank you for your business.			<b>Total</b> <b>\$150.75</b>		

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

# **RENTAL INVOICE**

DATE	INVOICE #
9/9/2005	2359

<b>BILL TO</b>
Delphi Energy & Engine Attn: David Draeger 2100 Burlingame, S.W. Grand Rapids, Mich. 49509

<b>JOB SITE</b>
Delphi Energy & Engine 2100 Burlingame, S.W. Grand Rapids, Mich. 49509 Authorized by: Todd Huver

QTY	DESCRIPTION	P.O. NO.	TERMS
		Verbal Todd H.	Net 10
		RATE	AMOUNT
1	15 Ton Water to Water Chiller Billed for 28 days Aug. 19, 2005 thru Sept. 15, 2005.	1,500.00	1,500.00
1	Delivery and pickup	250.00	250.00

**Total** **\$1,750.00**

OPTIONAL WAIVER PLAN: Upon accepting the optional waiver plan, the customer agrees to pay a charge equal to 14% of the rental charges on equipment customer wants covered by the waiver plan. In return, as set out on this back page, 1st Choice agrees to waive certain claims for accidental damage to such covered equipment occurring during normal and careful use. THE WAIVER PLAN IS NOT INSURANCE. Customer remains liable for all damages and loss due to theft listed under The waiver and protection plan provisions in the terms and conditions on back page, including customer's negligence.  
CUSTOMER ACCEPTS ( ) CUSTOMER DECLINES ( )

READ BEFORE SIGNING: 1st Choice hereby leases to customer the equipment (as defined in the terms and conditions on the reverse side) and customer hereby accepts all terms and conditions listed in this rental agreement, including the terms and conditions set forth on the reverse side, which the undersigned has read and understands. Recitals (1) rates do not include fuel or delivery; (2) optional damage waiver charge is 14% of the total rental charge for covered equipment; (3) customer pays for all time the equipment is out, including Saturdays, Sundays and Holidays; (4) this rental agreement supersedes all other purchase orders or terms and conditions contained in any of customer's agreements or forms; (5) customer assumes all risk and is responsible for all damages and other cost, including late charges, details of the above as well as other obligations and responsibilities are contained in the TERMS and CONDITIONS on reverse.

THE INDIVIDUAL SIGNING BELOW AS OR ON BEHALF OF CUSTOMER, (1) agrees to all of the terms and conditions on the reverse side of this rental agreement. (2) acknowledges receipt of the equipment in good working order and, (3) is fully familiar with its operation and use.

X \_\_\_\_\_  
Customer signature Name printed Date

# 1st Choice Heating & Cooling

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

# RENTAL INVOICE

DATE	INVOICE #
9/9/2005	2367

<b>BILL TO</b>
Delphi Energy & Engine Attn: David Draeger 2100 Burlingame, S.W. Grand Rapids, Mich. 49509

<b>JOB SITE</b>
Delphi Energy & Engine 2100 Burlingame, S.W. Grand Rapids, Mich. 49509 Authorized by: Todd Huver

QTY	DESCRIPTION	P.O. NO.	TERMS
		Verb Todd H.	Net 10
		RATE	AMOUNT
1	15 Ton Water to Water Chiller Billed for 28 days Sept. 16, 2005 thru Oct. 13, 2005.	1,500.00	1,500.00
<b>Total</b>			<b>\$1,500.00</b>

OPTIONAL WAIVER PLAN: Upon accepting the optional waiver plan, the customer agrees to pay a charge equal to 14% of the rental charges on equipment customer wants covered by the waiver plan. In return, as set out on the back page, 1st Choice agrees to waive certain claims for accidental damage to such covered equipment occurring during normal and covered use. THE WAIVER PLAN IS NOT INSURANCE. Customer remains liable for all damages and loss due to theft listed under The waiver and protection plan provisions in the terms and conditions on back page, including customer's negligence.  
CUSTOMER ACCEPTS ( ) CUSTOMER DECLINES ( )

READ BEFORE SIGNING: 1st Choice hereby leases to customer the equipment (as defined in the terms and conditions on the reverse side) and customer hereby accepts all terms and conditions listed in this rental agreement, including the terms and conditions set forth on the reverse side, which the undersigned has read and understands. Reminders (1) rates do not include fuel or delivery; (2) optional damage waiver charge is 14% of the total rental charge for covered equipment; (3) customer pays for all time the equipment is out, including Saturdays, Sundays and Holidays; (4) this rental agreement supersedes all other purchase orders or terms and conditions contained in any of customer's agreements or forms; (5) customer assumes all risk and is responsible for all damages and other cost, including late charges, details of the above as well as other obligations and responsibilities are contained in the TERMS and CONDITIONS on reverse.

THE INDIVIDUAL SIGNING BELOW AS OR ON BEHALF OF CUSTOMER: (1) agrees to all of the terms and conditions on the reverse side of this rental agreement. (2) acknowledges receipt of the equipment in good working order and, (3) is fully familiar with its operation and use.

X \_\_\_\_\_  
Customer signature Name printed Date

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
8/27/2005	2345

### **BILL TO**

Delphi  
999 Randall Road  
Coopersville, Mi 49404  
Attn: Rob Wygant

P.O. NO.	TERMS	WORK ORDER #
AIB01551	Net 45	2049

DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
Labor to pump down compressor on York unit #1 circuit #2 and changed load - unload solenoid valve and oil filter. Restarted and ran and checked unit operation. Unit now loading and unloading properly. Checked circuit #1 on Unit #1 of Systecon package. Checked temperature and pressures and observed compressor operation and amp draw. Compressor operating satisfactorily. Left parts for customer stock. Tech. DWC	7.75	64.00	8/11/2005	York Unit #1	496.00
Mileage	70	0.325	8/11/2005	York Unit #1	22.75
2464 Motors	2	492.03	8/11/2005	Stock	984.06
Fan 628 4 Blade Steel 28 Dia, 27 Deg. .625	2	205.66	8/11/2005	Stock	411.32
Bore CW					
02533205000 Capacity Control Valve	1	682.93	8/11/2005	Unit #1	682.93
02635601000 Oil Filter	8	105.44	8/11/2005	Unit #1, Stock	843.52
02813849000 O-Rings	8	13.98	8/11/2005	Stock	111.84
Thank you for your business.			<b>Total</b>		
			<b>\$3,552.42</b>		

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
8/27/2005	2346

### **BILL TO**

Delphi  
999 Randall Road  
Coopersville, Mi 49404  
Attn: Rob Wygant

P.O. NO.	TERMS	WORK ORDER #
AIB01551	Net 45	2044

DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
Labor to respond to call to check unit #41. Checked compressor #1 found high pressure control erratic. Trips from 250# - 350#. Also found low pressure control bouncing in and out. Circuit will not stay pumped down. Refrigerant is leaking back through discharge valves. Checked circuit #3. Liquid line solenoid valve is sticking checked unit #40 circuit #2 for compressor not running found compressor motor shorted to ground and burned. Tech. DWC	6.5	64.00	8/2/2005	Unit #40 & #41	416.00
Labor to pump refrigerant out of unit #40 circuit #2. Pumped down unit #41 to isolate compressor #1, removed heads from compressor and found one broken discharge valve. Checked York chillers to determine cause of high oil differential. Chiller #1 compressor #4 and Chiller#4 compressor #1 off on high motor current. Some air handlers were shut down to reduce load. Tech. DWC	10	64.00	8/3/2005	Unit #41, Chiller #1 & #4	640.00
Labor to changed filter and load solenoid on York Chiller #4 circuit #1 and changed oil filter on York Chiller #3 circuit #1. Tech. DWC	8.25	64.00	8/4/2005	York Chiller #3 & #4	528.00
Labor to reassembled unit #41 compressor #1 and evacuated. Still need high and low pressure controls. Pumped out compressor on York chiller #1 circuit #4 and changed load solenoid and oil filter. Still need load solenoid for circuit #2 on Chiller #1. Tech. DWC	8	64.00	8/5/2005	Unit #41, York Chiller #1	512.00
Mileage for Aug. 2, 3, 4 & 5, 2005.	260	0.325		Unit #41, Chiller #1 & #4	84.50
Thank you for your business.			<b>Total</b>		

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
8/27/2005	2346

### **BILL TO**

Delphi  
999 Randall Road  
Coopersville, Mi 49404  
Attn: Rob Wygant

		P.O. NO.	TERMS	WORK ORDER #	
		AIB01551	Net 45	2044	
DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
02529583000 Pressure Transducer	1	363.46	8/4/2005	Stock	363.46
025291390001 Pressure Transducer	1	363.46	8/4/2005	Stock	363.46
02533205000 Capacity Control Valve	2	682.93	8/4/2005	Chiller #3 & #4	1,365.86
02635601000 Oil Filter	4	105.44	8/4/2005	Chiller #3 & #4	421.76
02813849000 O-Rings	4	13.98	8/4/2005		55.92
Spor Solenoid Parts Kit	1	90.69	8/5/2005	Unit #41 Comp. #1	90.69
Cope Discus Valve Plate	1	587.67	8/5/2005	Unit #41 Comp. #1	587.67
553 Control	1	113.41	7/29/2005	Stock	113.41
1312 Control	1	189.69	7/29/2005	Stock	189.69
P29NC-3C Penn low press	2	171.21	8/4/2005	Unit #41	342.42
M118C coupling	6	3.20	8/5/2005	Stock	19.20
Thank you for your business.			<b>Total</b>		<b>\$6,094.04</b>

# **1st Choice Heating & Cooling**

8147 Islandview Drive  
Newaygo, MI 49337  
Office (231) 652-1435

## **Invoice**

DATE	INVOICE #
9/6/2005	2358

### **BILL TO**

Delphi  
999 Randall Road  
Coopersville, Mi 49404  
Attn: Rob Wygant

P.O. NO.	TERMS	WORK ORDER #
AIB01551	Net 45	2166

DESCRIPTION	QTY	RATE	SERVICED	UNIT USED ON	AMOUNT
Labor to remove defective compressor on Liebert unit in the comp. room. Recovered refrigerant from the old compressor and installed new compressor. Installed new seals on Roto-lock fittings and leak tested unit, OK. Evacuated and started unit performed partial checkout on unit will perform complete checkout on unit ASAP. Left unit running 78# suction, 235# head, 5.1, 5.1, 4.7 amps, volts 482, 481, 480. Tech. BHP	8	64.00	8/30/2005	Comp. Room	512.00
Mileage to job and to pick up parts.	130	0.325	8/30/2005	Comp. Room	42.25
085016000 cope phase monitor Control	1	159.50	8/30/2005	Comp. Room	159.50
AVA5538EXG R22 3hp Compressor	1	451.81	8/30/2005	Comp. Room	451.81
1/2" High capacity Refrigerant Drier C-164	1	25.49	8/30/2005	Comp. Room	25.49
Teflon seals		26.58	8/30/2005	Comp. Room	26.58
Truck Charge- Recovery and vacuum pump.	1	40.00	8/30/2005	Comp. Room	40.00
Thank you for your business.			<b>Total</b> <b>\$1,257.63</b>		

UNITED STATES BANKRUPTCY COURT <u>Southern</u> DISTRICT OF <u>New York</u>		<b>PROOF OF CLAIM</b>
Name of Debtor <b>Delphi Automotive Systems LLC</b>		Case Number <b>05-44640</b>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (The person or other entity to whom the debtor owes money or property): <b>First Choice Heating &amp; Cooling Inc</b> Name and address where notices should be sent:  <b>First Choice Heating &amp; Cooling Inc</b> <b>8147 Islandview Dr</b> <b>Newaygo MI 49337</b>		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.
Telephone number: <b>231-652-1435</b>		Master Code: <b>10398111</b>
Account or other number by which creditor identifies debtor:		THIS SPACE IS FOR COURT USE ONLY
Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____		
<b>1. Basis for Claim</b> <input checked="" type="checkbox"/> Goods Sold / Services Performed <input type="checkbox"/> Customer Claim <input type="checkbox"/> Taxes <input type="checkbox"/> Money Loaned <input type="checkbox"/> Personal Injury <input type="checkbox"/> Other _____ <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Last four digits of SS #: _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
<b>2. Date debt was incurred:</b> <u>9/9/2005 - 9/26/2005</u>		<b>3. If court judgment, date obtained:</b> <u>NO</u>
<b>4. Total Amount of Claim at Time Case Filed:</b> \$ <u>9,555.10</u> (unsecured) (secured) (priority) (Total) If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.		
<b>5. Secured Claim.</b> <input checked="" type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral: \$ <u>exceeds Value of claim</u> Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____		<b>7. Unsecured Priority Claim.</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,000)* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____). *Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment. \$10,000 and 180-day limits apply to cases filed on or after 4/20/05. Pub. L. 109-8.
<b>6. Unsecured Nonpriority Claim \$</b> _____ <input type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.		
<b>8. Credits:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. <b>9. Supporting Documents:</b> Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary. <b>10. Date-Stamped Copy:</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim		THIS SPACE IS FOR COURT USE ONLY <div style="border: 2px solid black; padding: 10px; text-align: center;"> <b>RECEIVED</b>  <b>AUG - 2 2006</b>                      CLAIMS PROCESSING CENTER                      USBC, SDNY                 </div>
Date <u>7-31-06</u> Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): <u>Chris Deegan</u> Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.		



UNITED STATES BANKRUPTCY COURT <u>Southern</u> DISTRICT OF <u>New York</u>		PROOF OF CLAIM
Name of Debtor <b>Delphi Corporation</b>		Case Number <b>05-44481</b>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (The person or other entity to whom the debtor owes money or property): <b>1st Choice Heating &amp; Cooling I</b>		<input checked="" type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input checked="" type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.
Name and address where notices should be sent:  <b>1st Choice Heating &amp; Cooling I</b> <b>8147 Islandview Dr</b> <b>Newaygo MI 49337</b>		
Telephone number: <b>231-652-1435</b>		THIS SPACE IS FOR COURT USE ONLY
Account or other number by which creditor identifies debtor:		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____
<b>1. Basis for Claim</b> <input checked="" type="checkbox"/> Goods Sold / Services Performed <input type="checkbox"/> Customer Claim <input type="checkbox"/> Taxes <input type="checkbox"/> Money Loaned <input type="checkbox"/> Personal Injury <input type="checkbox"/> Other _____ <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Last four digits of SS #: _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
<b>2. Date debt was incurred:</b> <u>8-27-05 - 9-6-05</u>		<b>3. If court judgment, date obtained:</b> <u>NO</u>
<b>4. Total Amount of Claim at Time Case Filed:</b> \$ <u>12,491.44</u> (unsecured) <u>12,491.44</u> (secured) (priority) (Total) If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.		
<b>5. Secured Claim.</b> <input checked="" type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral: <u>\$ exceeds value of claim</u> Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____		<b>7. Unsecured Priority Claim.</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,000)* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____). <small>*Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment. \$10,000 and 180-day limits apply to cases filed on or after 4/20/05. Pub. L. 109-8.</small>
<b>6. Unsecured Nonpriority Claim \$</b> _____ <input type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.		THIS SPACE IS FOR COURT USE ONLY
<b>8. Credits:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		
<b>9. Supporting Documents:</b> Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.		
<b>10. Date-Stamped Copy:</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim		THIS SPACE IS FOR COURT USE ONLY
Date <u>7/31/06</u>	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): <u>Oneir Prognos</u>	

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

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